

Summary of Government Accountability Office (GAO) Report:

September 11: HHS Needs to Ensure Availability of Health Screening and Monitoring for all Responders

And recent events on the federal response to the 9/11 Health Crisis

-Prepared by the Office of Rep. Carolyn B. Maloney-

See PDF of the GAO Report here:

<http://maloney.house.gov/documents/911recovery/20070724FinalGAOReport911Health.pdf>

The GAO Recommends that the Secretary of Health and Human Services (HHS), Michael O. Leavitt, expeditiously take action to make sure that ***all responders*** have access to health screening and monitoring services, including (1) federal responders and (2) responders who live outside of the New York metropolitan area, two groups for whom HHS has failed to ensure availability of services (bottom of p. 6).

For Federal Employees: GAO found that HHS has not ensured the uninterrupted availability of screening services and is not designed to provide monitoring. See Timeline of Key Actions (Figure 1, p. 15) showing the major gaps in conducting screenings and providing specialty diagnostic tests for federal employees. The start-stop-start-stop-start history of the WTC Federal Responder Screening Program occurred because interagency agreements were not established in a timely way to keep the program operational. If federal responders do not receive monitoring, health conditions that arise later may not be diagnosed and treated, and knowledge of the health effects may be incomplete.

For Responders outside of NYC Metropolitan Area: GAO also found that HHS has not ensured the availability of services for responders living outside of the NYC Metropolitan area. Two initial attempts to do so have not been successful. Currently, the National Institute of Occupational Safety and Health (NIOSH) is exploring how to establish a fully-operational national program. Those efforts were incomplete at the time of the writing of GAO's report (p. 21). However, since the time of writing, NIOSH has done a great deal of work in creating a draft outline of a plan to treat and monitor ailing 9/11 responders, as noted by the *New York Times* (July 18, 2007, "Big Cost Increase Is Predicted to Treat Ground Zero Workers") and the *New York Daily News* editorial page (July, 22, 2007, "Leavitt's failure, by the numbers"). The draft outline of a plan is available on Rep. Maloney's website at http://maloney.house.gov/documents/911recovery/20070615_WTC_Medical_Monitoring_and_Treatment_Program.pdf

Cost Estimates for serving responders: GAO noted that HHS lacks a reliable estimate of service costs because the January 30, 2007 estimate of \$283 million per year relied on questionable assumptions. GAO could not say whether that estimate overstated or understated the cost of serving responders. However, since the time the GAO report was written, the draft outline of plan created by NIOSH and mentioned above, presented an updated cost estimate based partially on actual cost data. The updated estimate shows that the annual cost of the program will probably rise from a current \$194 million to \$428 million annually. Possibly, the cost could soar to \$712 annually. See the updated cost estimate on p. 33 of the recent draft outline of a plan:

http://maloney.house.gov/documents/911recovery/20070615_WTC_Medical_Monitoring_and_Treatment_Program.pdf